STATE OF SOUTH DAKOTA Statement of Legal Newspaper Ownership and Circulation

Statement of Legal Newspaper		
I. TITLE OF NEWSPAPER Lakota Time	S	2. DATE 9-30-20
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH	IED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE S 65
COMPLETE WAILING ADDRESS OF KNOWN OFFICE OF	PUBLICATION (Stree	t, City, County, State and ZIP+4 Code)
Not printers) SD 4114 73 BDX 386.	martin,	S.D. 5755 Be
S. COMPLETE MAILING ADDRESS OF THE HEADQUARTER	RS OR GENERAL BU	SINESS OFFICES OF THE
29263 SD HWY 13, BOX 386	martin	SD 57501
5. FULL NAME OF PUBLISHERS	LISE SM	170
7. OWNER (If owned by a corporation, its name and address must addresses of stockholders owning or holding 1 percent or more names and addresses of the individual owners must be given. If and address, as well as that of each individual must be given. FULL NAME	of total amount of stock owned by a partnership	. If not owned by a corporation, the
Funderbird medie Inc 292	13 SN6WUL7	2. Box 386. Martin 3
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, Mostate. If more space is needed, list on back of this form.	SECURITY HOUDER	S OWNING OR HOLDING 1
NONE	5	
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. CO EACH ISSUED PRECEDIN	ISSUED
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	MONTHS 4002	4002
B.PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors,	227	2720
and counter sales. 2. Mail Subscription	2.0.00	2 1 2 1 2
(Paid and or requested)	1060	2 1062
3. Paid Electronic Copies	20,	2 202
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	3484	3484
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	250	250
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	100	100
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	3834	3834
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	48	48
2. Return from News Agents	120	120
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	4002	4002
Statement must be signed by Publisher, Business Mana	ger, or Owner in th	e presence of a Notary Public
I swear that the statements made by me are true, o	correct, and comp	lete;
(Signature)	owner	(Title)
	Sworn to before me	this A day of Sept, 20 2
State of South Dakota) §	Kumb	elet Jams
County of Bernett)	7	Newary Public
	My commission exp	ires: 5 1 2 T

(Seal)